CANDIDATE ADVERTISEMENT AGREEMENT FORM

See Order for proposed schedule and charges. See Invoice for actual schedule and charges.	
I, Jessica M. Laughlin	hereby request station time as follows:
I, Jessica W. Laugillin	
IDENTIFY CANDIDATE TYPE STATE OR LOCAL CANDIDATE STATE OR LOCAL CANDIDATE	
ALL QUESTIONS/BLOCKS MUST BE COMPLETED	
Candidate name:	
Jessica M. Laughlin	
Authorized committee:	
None at this time Agency requesting time (and contact information): N/A	
Candidate's political party:	
Republican Office sought (no acronyms or abbreviations): Scotts Bluff County Commissioner District five Date of election: May 10, 2022 Treasurer of candidate's authorized committee: None at this time The undersigned represents that: (1) the payment for the broadcast time requested has been the candidate listed above who is a legally qualified the authorized committee of the legally qualified care (2) this station is authorized to announce the time as paid for (3) this station has disclosed its political advertising policies, and other sales practices.	furnished by (check one box below): candidate, or ndidate listed above;
Candidate/Committee/Agency	Station Representative ///
Signatule: Signatule: Name: Jessica M. Laughlin	Signature: Sull 4/14/22 Name: Dorg Southand
Date of Request to Purchase Ad Time: 4/14/22	Date of Station Agreement to Sell Time:

Federal Candidate Certification: The undersigned hereby certifies that the broadcast matter to be aired pursuant to this disclosure either (1) does not refer to an opposing candidate or, if it does, (2) contains a clearly identifiable photograph or similar image of the candidate for a duration of at least four seconds and a simultaneously displayed printed statement identifying the candidate, that the candidate approved the broadcast and that the candidate and/or the candidate's authorized committee paid for the broadcast or if radio programming, contains a personal audio statement by the candidate that identifies the candidate, the office being sought and that the candidate has approved the broadcast. Candidate/Authorized Committee/Agency Signature: Name: Date: TO BE COMPLETED BY STATION ONLY Ad submitted to Station? Date ad received: No Federal candidate certification signed (above): Yes Disposition: Accepted Accepted IN PART (e.g., ad copy not yet received to determine sponsor ID)* Rejected - provide reason (optional): *Upload partially accepted form, then promptly upload updated final form when complete. Date and nature of follow-ups, if any (e.g., insufficient sponsor ID tag): Date Received/Requested Contract #: Run Start and End Dates; Est. #: Upload order, this form and invoice (or traffic system print-out) or other documents reflecting this transaction to the OPIF or use this space to document schedule of time purchased, when spots actually aired, the rates charged and the classes of time purchased or attach separately. If station will not upload the actual times spots aired until an invoice is generated, the name of a contact person who can provide that information immediately should be placed in the "Terms and Disclosures" folder in the OPIF.